

Transcript Request Form

Please complete all sections of this form. Transcripts are processed every Tuesday and Friday for requests received by 3:00 p.m. the previous day. Delays in processing may occur during the end of the semester, holidays and graduation. Transcripts will not be released if there is an outstanding financial obligation to the University.

Number of transcripts requested: _____ Cost is \$5.00 per transcript

(Complete a separate Transcript Request Form for each mailing address.)

▶ **Dates of Attendance:**

Start: _____ End: _____

▶ **Date of Graduation:** _____

Processing Options:

- Hold transcript for pickup
- Same-day processing (additional \$5.00 fee)
- Next day delivery (additional \$20.00 fee)

- Fax (additional \$5.00 fee)
If faxed, send transcripts to:

Attn: _____

Fax Number: _____

- Mail
If mailed, when should transcripts be sent?
 - Now
 - After current semester/class/graduation

Send transcript to:
(Please print)

Attn: _____

Organization: _____

Address: _____

City/State/Zip: _____

Social Security Number _____ Date of Birth _____

Current Last Name _____ First _____ Middle _____

Maiden/Former Name(s) while attending Malone _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Student's Signature _____ Date _____

***Payment may be made by cash, check or money order
(payable to Malone University), or credit/debit card.***

Credit Card # _____ Exp. Date _____ V-Code _____

***Submit completed form to the Office of the Registrar, or send by
mail, scan/email or fax to the above address/number.***

OFFICE USE ONLY

Paid \$ _____ cash/check/credit Date Transcript Picked Up _____

Owes \$ _____